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DECLARATION and POWER OF ATTORNEY

PATENT (U.S.A.) ATTORNEY'S DOCKET NO. 101.0084-00000 Express Mail No.. EL399233355US

and POWER OF ATTORNEY

As a below name (avernor) relevance that the information given herein is true, that I believe that I am the original, first and sole inventor (if only one name is listed as 1 below) or an original, first and joint inventor (if plural names are listed below) of the subject matter which is claimed and for which a patent is sought on the invention entitled:

		riginal, first and joint inventor (if plural names are listed below) of the subject matte AL IMPLANT SURFACE CONFIGURATION.	er which is claimed and for whi							
		cification of which is attached hereto unless the following box is checked:								
		was filed on as United States Application Number or PCT Internation	nal Application Numberar	nd was amended	on					
į	ackno	dence, post office address and citizenship are as stated below next to my name. wledge my duty to disclose information which is material to the patentability of this	application in accordance with	n Title 37. Code	of Federal Regulations 8	1.56(a).				
1	hereby	state that I have reviewed and understand the contents of the above identified sp	ecification, including the claim	is, as amended l	by any amendment referre	ed to above.				
I hereby claim foreign priority benefits under Title 35, United States Code, § 119 of any foreign application(s) for patent or inventor's certificate listed below and have also identified below any foreign application for patent or inventor's certificate having a filing date before that of the application on which priority is claimed.										
		PRIOR FOREIGN	••	•	•					
-		100-100-100-100-100-100-100-100-100-100	DATE OF FILING	i	PRIORITY CLAIMED	UNDER				
_		COUNTRY APPLICATION NUMBER	Month Day Year		35 U.S.C 11	9				
_										
1	hereby	y claim the benefit under Title 35, United States Code, §120 of any United States a blication is not disclosed in the prior United States application in the manner provid	application(s) listed below and, led by the first paragraph of Ti	, insofar as the s tle 35. United Sta	ubject matter of each of that ates Code § 112. I acknow	ne claims of				
(	duty to	disclose information which is material to patentability as defined in Title 37, Code	of Federal Regulations, § 1.56	(a) which occurre	ed between the filing date	of the prior				
•	арриса	tion and the national or PCT international filing date of this application								
-		•								
	• • •	ation Serial No.) (Filing	•			(Status)				
		R OF ATTORNEY: As a named Inventor, I hereby appoint the following attorney(s ademark Office connected therewith.	s) and/or Agent(s) to prosecute	this application	and transact all business	in the Patent				
	Thomas	s H. Martin, Esq., Reg. No. 34,383; and Amedeo Ferraro, Esq., Reg. No. 37,129								
	Send	correspondence to:	DIRECT TELEPHONE CALL		leo Ferraro 86-9800					
200		Customer ID #22882								
		MARTIN & FERRARO LLP 14500 Avion Parkway, Suite 300								
		<b>22882</b> Chantilly, VA 20151-1101								
		703-679-9300 TEL PATENT TRADEHARK OFFICE 703-679-9303 FAX								
	: (Please									
	i icasc		D:4 0/T/		OTATE - COUNTRY	*				
illant,		Name of Inventor	Residence: CITY		STATE or COUNTRY					
	. 1	Gary K. Michelson, M.D.	Venice	1	California					
		Post Office Address			CITIZENSHIP					
=		438 Sherman Canal, Venice, CA 90291		US						
111		Name of Inventor	Residence: CITY		STATE or COUNTRY	:				
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2		Post Office Address		CITIZENSHIP						
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1		Name of Inventor	Residence: CITY		STATE or COUNTRY	-				
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					T					
	4	Name of Inventor	Residence CITY		STATE or COUNTRY					
	1	Post Office Address				CITIZENSHIP				
		1 000 00000			OHZENSHIF					
		declare that all statements made herein of my own knowledge are true and that all statements made on information and belief are believed to be true; and further that atements were made with the knowledge that willful false statements and the like so made are punishable by fine or imprisonment, or both, under Section 1001 of Title								
18 of the United States Code, and that such willful false statements may jeopardize the validity of the application or any patent issuing thereon.										
	SIGN	IATURE OF (NVENTQR 1 _ ) (	SIGNATURE OF INVENTOR 2							
	,-1	melyla holde								
	DATE	2/19/2000	DATE							
	SIGN	IATURE OF INVENTOR 3	SIGNATURE OF INVENTOR 4							

DATE

DATE

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## **DECLARATION** and POWER OF ATTORNEY

As a below named inventor, information given herein is true, that I believe that I am the original, first and sole inventor (if only one name is listed as 1 below) or an original, first and joint inventor iff our lames are listed below) of the subject matter which is claimed and for which a patent is sought on the invention entitled:

SPINA the spe My resid I acknow I hereby I hereby	AL IMPLANT SURFACE CON cification of which is attached hereto under the control of the control o		al Application Numberand application in accordance with cification, including the claims ign application(s) for patent o	d was amended Title 37, Code o s, as amended b r inventor's cert	on of Federal Regulations § 1 56(a) by any amendment referred to above fficate listed below and have also					
****	PRIOR FOREIGN APPLICATION(S)									
COUNTRY APPLICATION NU		APPLICATION NUMBER	DATE OF FILING Month Day Year		PRIORITY CLAIMED UNDER 35 U.S C. 119					
this app duty to	olication is not disclosed in the prior Un	ed States Code, §120 of any United States ap lited States application in the manner provide to patentability as defined in Title 37, Code of nal filing date of this application.	d by the first paragraph of Titl	e 35. United Sta	ates Code § 112. I acknowledge the					
(Applic	ation Serial No.)	(Filing I	Date)	***************************************	(Status)					
POWER OF ATTORNEY: As a named Inventor, I hereby appoint the following attorney(s) and/or Agent(s) to prosecute this application and transact all business in the and Trademark Office connected therewith.  Thomas H. Martin, Esq., Reg. No. 34,383; and Amedeo Ferraro, Esq., Reg. No. 37,129  Send correspondence to:  DIRECT TELEPHONE CALLS TO: Amedeo Ferraro 310-286-9800  Customer ID #22882  MARTIN & FERRARO LLP 14500 Avion Parkway, Suite 300  Chantilly, VA 20151-1101  703-679-9300 TEL 703-679-9303 FAX  MIENT TRIDEMAK OFFICE										
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	Name of Inventor		Residence: CITY		STATE or COUNTRY					
3	3 Post Office Address			CITIZENSHIP						
	Name of Inventor		Residence: CITY	I	STATE or COUNTRY					
4 Post Office Address					CITIZENSHIP					
these	statements were made with the knowle	rein of my own knowledge are true and that a adge that willful false statements and the like willful false statements may jeopardize the va	so made are punishable by fir	ne or imprisonm	ent, or both, under Section 1001 of Title					
SIGI	NATURE OF INVENTOR 1		SIGNATURE OF INVENTOR 2							
DAT	E		DATE							
SIGNATURE OF INVENTOR 3 SIGNATURE OF INVENTOR 4										
DAT	E		DATE							